

Section III 510(k) Summary

FEB 2 5 2009

As Required by CFR 807.92

Sponsor:

Contec Medical Systems Co., LTD

No.2-1 Hengshan Road,

Economic and Technical Development Zone

Qinhuangdao, Hebei, 066000, People's Republic of China

Mr. Li Xueyong Quality Manager

Tel: Fax: Email:

Correspondent:

Shanghai Mid-Link Business Consulting Co., Ltd

Suite 8D, No.19, Lane 999, Zhongshan No.2 Road(S)

Shanghai, 200030, China

Ms. Diana Hong / Mr. Lee Fu

Tel: 021-64264467 Fax: (760)466-5084

Email: diana.hong@mid-link.net

Proposed Device:

Device Trade/Proprietary Name: Contec Pocket Fetal Doppler

Model: SONOLINE A/ SONOLINE B/Baby Sound A/Baby Sound

В

Device Common Name: Fetal ultrasonic monitor and accessories

Device Classification Name: monitor, ultrasonic, fetal

Product Code: KNG

Regulation Number: 884.2660

Device Class: II

Intended Use:

Contect Pocket Fetal Doppler (SONOLINE A, SONOLINE B, Baby Sound A and Baby Sound B) are hand-held, battery powered audio Doppler devices used for detecting fetal heart beats. They are all available for user replaceable batteries. The user interface includes power button, mode button, volume control, single speaker, headphone jack and LCD display for heart rate, battery and working mode, probe type.

SONOLINE A and SONOLINE B includes four interchangeable probes (2MHz normal probe,2MHz water proof probe,3MHz normal probe, 3MHz proof resistance probe), while Baby Sound A and Baby Sound B are integrated with 2MHz probe.

Predicate Device

LifeDop Doppler Ultrasound System

K-number: K024197 Product Code: KNG

Intended Use:

The LifeDop is a hand-held, battery powered audio Doppler device used for detecting fetal heart beats and for blood flow detection in veins and arteries. the product includes four interchangeable probes(OB Late Term, OB Early Term, Vascular pencil probe, Vascular flat face probe) and user replaceable batteries. the user interface includes an on/off button, play/record button, volume control, single 2-1/4" speaker, headphone jack and LCD display for heart rate, battery and waveform information.

Manufactured by:

Summit Doppler Systems, Inc.

Add:5350 Vivian St. Suite A, Arvada, CO 80002-1957

Tel:(303)423-7572 Fax:(303)431-5994

Device Description

Contect Pocket Fetal Doppler includes four models, SONOLINE A, SONOLINE B, Baby Sound A and Baby Sound B. They are handheld, battery powered audio Doppler devices used for detecting fetal heart beats. They are all available for user replaceable batteries.

SONOLINE A and SONOLINE B include four interchangeable probes (2MHz normal probe, 2MHz water proof probe, 3MHz normal probe and 3MHz proof resistance probe), while Baby Sound A and Baby Sound B are integrated with 2MHz probe.

Testing

Laboratory testing was conducted to validate and verify that Contec Pocket Fetal Doppler met all design specifications, including electrical safety, EMC, specification. Results of these tests demonstrate compliance to the requirements of all consensus standards

Substantially Equivalent

The proposed device, Contec Pocket Fetal Doppler, is substantially equivalent (SE) to the predicate device LifeDop Doppler Ultrasound System (K024197).





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Contec Medical Systems Co., Ltd. % Ms. Diana Hong General Manager Shanghai Mid-Link Business Consultant Co., Ltd. Suite 8D, No. 19, Lane 999, Zhongshan No.2 Road Shanghai, 200030

FEB 2 5 2009

Re: K082480

CHINA

Trade/Device Name: Contec Pocket Fetal Doppler

Models: Sonoline A/B and Baby Sound A/B

Regulation Number: 21 CFR 884.2660

Regulation Name: Fetal ultrasonic monitor and accessories

Regulatory Class: II Product Code: KNG Dated: February 17, 2009 Received: February 17, 2009

Dear Ms. Hong:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

This determination of substantial equivalence applies to the following transducers intended for use with the Contec Pocket Fetal Doppler - Models: Sonoline A/B and Baby Sound A/B, as described in your premarket notification:

Transducer Model Number

2MHz Normal Probe CMS-150-T0
2MHz CW Water Proof CMS-150-T1
3MHz CW Normal Probe CMS-150-T5
3MHz CW Water Proof Probe CMS-150-T2

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus permits your device to proceed to market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html

If you have any questions regarding the content of this letter, please contact Lauren Hefner at (240) 276-3666.

Sincerely yours,

A Janine M. Morris

Acting Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure(s)

Exhibit D Indication for Use Form

510(k) Number: K082480

Device Name: Contec Pocket Fetal Doppler

Indications for Use:

Contect Pocket Fetal Doppler (SONOLINE A, SONOLINE B, Baby Sound A and Baby Sound B) are hand-held, battery powered audio Doppler devices used for detecting fetal heart beats. They are all available for user replaceable batteries. The user interface includes power button, mode button, volume control, single speaker, headphone jack and LCD display for heart rate, battery and working mode, probe type.

SONOLINE A and SONOLINE B includes four interchangeable probes (2MHz normal probe,2MHz water proof probe,3MHz normal probe,3MHz water proof probe), while Baby Sound A and Baby Sound B are integrated with 2MHz probe.

Prescription Use	AND/OR	Over-The-Counter Use (21 CFR 801 Subpart C)
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(Division Sign-Off)

Division of Reproductive, Abdominal and

Radiological Devices 510(k) Number ____

K082480

Diagnostic Ultrasound Indications for Use Form

Fill out one form for each ultrasound system and each transducer.

Device Name: SONOLINE A and SONOLINE B fetal Doppler

Main unit fetal system with either 2MHz CW or 3.0MHz CW

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application						N	Mode of Opera	tion		
	A	В	М	PWĎ	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (B/M)	Other (specify)
Ophthalmic										
Fetal					N					
Abdominal										
Intraoperative (specify)										
Intraoperative Neurologica		ļ								
Pediatric										
Small Organ (specify)		ļ						<u> </u>		
Neonatal Cephalic										
Adult Cephalic										
Transesophageal										
Transrectal										
Transvaginal										
Transurethral				[
Intravascular										
Peripheral Vascular										
Laparoscopic										
Musculo-skeletalConventional										
Musculo-skeletal Superficial										
Other (specify)										
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	1 .									
N= new indication;	e= previ	ously	cleared	i by FD	A; E= ad	ded under	Append	ix E		
Comments:	•							•		
The system consists	of main	unit y	with eit	her 2M	Hz CW o	r 3.2 MH:	CW for	fetal a	pplications.	
Only one transducer	can be u	sed v	vith the	main u	ınit at one	time				
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Prescription Use (Per 21 CFR 801.109)

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Division of Reproductive, Abdominal and

Radiological Devices 510(k) Number ____

(082480

Diagnostic Ultrasound Indications for Use Form

Fill out one form for each ultrasound system and each transducer.

Device Name: 2MHz normal probe CMS-150-T0

Clinical Application						N	lode of Opera	tion		
	. A	В	М	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (B/M)	Other (specify)
Ophthalmic										
Fetal					N			,		
Abdominal				-					i	
Intraoperative (specify)								<u></u>		
Intraoperative Neurologica									<u>.</u>	
Pediatric										
Small Organ (specify)										
Neonatal Cephalic										
Adult Cephalic						-			,	
Transesophageal										
Transrectal										
Transvaginal		-		}				•		
Transurethral						. <u> </u>				
Intravascular										
Peripheral Vascular										
Laparoscopic]			<u> </u>				
Musculo-skeletalConventional										
Musculo-skeletal Superficial		Т								
Other (specify)									<u> </u>	
N= new indication;)= F	revi	ousl	y cleare	d by FI)A; E= ad	ded under Ap	pendix E		
Comments: <u>The above is a 2.0M</u>		~···		•			•	_		-

N= new indication; P= previously cleared by FDA; E= added under Appendix E	3
Comments:	
The above is a 2.0MHz CW transducer for fetal heart detection	
	·
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Concurrence of CDRH, Office of Device Evaluation (ODE)	
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Prescription Use (Per 21 CFR 801.109)

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Division of Reproductive, Abdominal and

Radiological Devices 510(k) Number ____

K082480

Diagnostic Ultrasound Indications for Use Form

Fill out one form for each ultrasound system and each transducer.

Device Name: 2MHz CW water proof probe CMS-150-T1

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application						Ŋ	Mode of Opera	tion		
	A	В	M	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (B/M)	Other (specify)
Ophthalmic	-						·			
Fetal]	N .				:	
Abdominal			,		-					
Intraoperative (specify)							. *		_	
Intraoperative Neurologica										
Pediatric										
Small Organ (specify)							;			
Neonatal Cephalic										
Adult Cephalic					·					
Transesophageal										
Transrectal					·					
Transvaginal							•			
Transurethral								,		
Intravascular		<u> </u>							i	
Peripheral Vascular				<u>.</u>	٠					
Laparoscopic										
Musculo-skeletalConventional										
Musculo-skeletal Superficial						-				
Other (specify)										
				,						

l= new indication	n; P= prev	iously cleare	ed by FDA;	E= added	under Appendi	хE	•
Comments:							
The above is a 2.0	MHz CW	transducer	for fetal he	art detectio	m.		
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Prescription Use (Per 21 CFR 801.109)

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Division of Reproductive, Abdominal and

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Diagnostic Ultrasound Indications for Use Form Fill out one form for each ultrasound system and each transducer.

Device Name: 3MHz CW normal probe CMS-150-T5

Clinical Application	'					N	Iode of Opera	tion		
	A	В	М	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (B/M)	Other (specify)
Ophthalmic				-,						
Fetal					N					
Abdominal							••••			
Intraoperative (specify)			·				, ,			
Intraoperative Neurologica						-	···· ·= u.e.			
Pediatric										
Small Organ (specify)								-		
Neonatal Cephalic							·			
Adult Cephalic		_								
Transesophageal			_					~ .		
Transrectal									•	
Transvaginal										
Transurethral					-					
Intravascular								``		
Peripheral Vascular							······································	,		
Laparoscopic							····			
Musculo-skeletalConventional										
Musculo-skeletal Superficial										
Other (specify)								,		
N= new indication; P Comments: The above is a 3.0MI		•						pendix E		

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Prescription Use (Per 21 CFR 801.109)

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Division of Reproductive, Abdominal and

Radiological Devices

510(k) Number

Diagnostic Ultrasound Indications for Use Form Fill out one form for each ultrasound system and each transducer.

Device Name: 3MHz CW water proof probe CMS-150-T2

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application						N	Mode of Opera	tion		
	A	В	М	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (B/M)	Other (specify)
Ophthalmic									-	
Fetal					N					
Abdominal										
Intraoperative (specify)										
Intraoperative Neurologica						·				
Pediatric									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Small Organ (specify)										· · · · · · · · · · · · · · · · · · ·
Neonatal Cephalic							· ·			
Adult Cephalic										
Transesophageal		. "		·						
Transrectal		Ī.,								· · · · ·
Transvaginal										
Transurethral										
Intravascular						· ·			.,	
Peripheral Vascular										
Laparoscopic							· -			
Musculo-skeletalConventional										-
Musculo-skeletal Superficial							····	, .		
Other (specify)			,							
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N= new in	ndication; P	= pr	evic	ously	cleare	d by FE)A; E= ad	ided und	ler Appe	ndix E		
Comment	s:							-				
The above	is a 3.0MI	Hz C	W t	rans	ducer f	or fetal	heart dete	ection.				
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Prescription Use (Per 21 CFR 801.109)

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Division of Reproductive, Abdominal and

Radiological Devices

Diagnostic Ultrasound Indications for Use Form Fill out one form for each ultrasound system and each transducer.

Device Name: Baby Sound A and Baby Sound B

Main unit fetal system ingreted with 2MHz CW transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

Clinical Application						N	Aode of Opera	tion		
	A	В	М	PWD	CWD	Color Doppler	Amplitude Doppler	Color Velocity Imaging	Combined (B/M)	Other (specify)
Ophthalmic										
Fetal					N			·		•
Abdominal								·		
Intraoperative (specify)					•					
Intraoperative Neurologica		l								-
Pediatric										
Small Organ (specify)										
Neonatal Cephalic										
Adult Cephalic										
Transesophageal						,				
Transrectal										
Transvaginal										
Transurethral										
Intravascular										
Peripheral Vascular										•
Laparoscopic										
Musculo-skeletalConventional										
Musculo-skeletal Superficial			1							
Other (specify)										

skeletal Superficial									
her (specify)			-		· ·				
				′					
N= new indication; I	e pr	evious	ly cleare	d by FD	A; E= ad	ded under A	ppendix E	, , ,	
Comments:									
The system consists	of m	ain uni	t is integ	grated w	ith 2MHz	CW transdu	cer for feta	l applications.	
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